

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NARAL Pro-Choice America PAC

A.

Full Name (Last, First, Middle Initial)

Lynde B. Uihlein

Mailing Address 205 E. Wisconsin Avenue
#200

City State Zip Code
Milwaukee WI 53202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 4 / 2 0 0 6

Transaction ID: C249005

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

6550.00